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**AFFIDAVIT**

STATE OF TEXAS §

COUNTY OF Fannin §

BEFORE ME, the undersigned authority, personally appeared Linda Mitchell, who, being by me duly sworn deposed and said:

"My name is Linda Mitchell. I am over the age of twenty-one years, of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated.

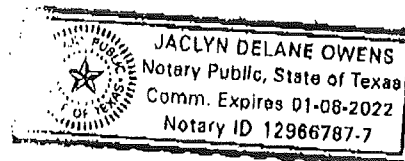
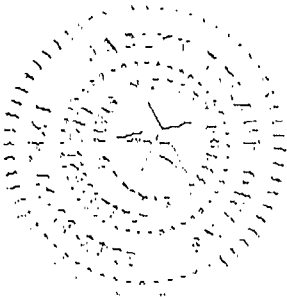
"I am the custodian of records of The Family Care Clinic and Dr. James E. Froelich. Attached hereto are 4 pages of records reflecting treatment and services rendered to David W. Spindle by said medical facility. These records are kept in the regular course of business, and it was the regular course of business in the office of a representative of that medical facility, with knowledge of the act, event, condition or opinion recorded, to make the record or to transmit information thereof to be included in such record; and the record was made at or near the time of the act, event, condition or opinion recorded, or reasonably soon thereafter. The records attached hereto are exact duplicates of the originals, and it is a rule of said medical facility not to permit the originals to leave its office."

Linda Mitchell  
Affiant

SUBSCRIBED AND SWORN TO before me on the 24th day of October, 2019, to certify which witness my hand and seal of office.

Jaclyn Owens  
Notary Public, State of Texas  
Jaclyn Owens  
Printed Name of Notary

My Commission Expires: 01-08-2022



Family Care Clinic  
2105 N. Center St.  
Bonham, Texas 75418

Office Open:  
Mon. - Fri.

**J.E. FROELICH, D.O.**

Family Practice - General Medicine



Office: 583-3191

Fax: 583-3973

Hospital: 583-8585

**CERTIFICATE TO RETURN TO WORK OR SCHOOL**

Mr.

Mrs.

Ms.

David Spindle

was under my care from \_\_\_\_\_ to \_\_\_\_\_

and will be able to return to work/school on 12-20-2017

Remarks \_\_\_\_\_

May return to work  
with no restrictions

Dr.

Froelich D.O./D. Mize

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### CONSENT FOR RELEASE OF MEDICAL RECORDS

I hereby authorize J.E. Froelich, DO/Family Care Clinic to release the following information from the health records of:

Patient Name: David W. Spindle

DOB: [redacted]

Patient Address: P.O.Box 323, Ector, TX 75439

- ☐ COMPLETE MEDICAL RECORDS  
☐ EXCLUDING INFORMATION RELATED TO HIV AND/OR RESULTS  
☐ HISTORY AND PHYSICAL ONLY  
☒ OTHER: Copy of "Certificate to Return to Work" on 12/20/2017

The reason for this request is: ☐ Transfer of care to another healthcare physician  
☐ 2<sup>nd</sup> Opinion  
☐ Social Security/Disability  
☒ Other: Employment law suit

Please release requested information to:

☒ Ronald R. Huff  
☐ Law Office of Ronald R. Huff  
☐ 112 S. Crockett St.  
☐ Sherman, Texas 75090  
☐ 903-893-1616  
☐ 903-813-3265  
☐ ronhuff@gceciisp.com

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I understand that this consent can be revoked at any time except to the extent that disclosure made in good faith has already occurred in reliance on this consent. The facility, it's employee's and attending physicians are released from legal responsibility or liability for the release of the above information to the extent indicated and authorized herein.*

[Signature]  
Patient/Legal Guardian Signature

10/19/19  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

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**RONALD R. HUFF**  
ATTORNEY AND COUNSELOR AT LAW  
112 SOUTH CROCKETT STREET  
SHERMAN, TEXAS 75090

RONALD R. HUFF  
ronhuff@gcrelp.com

Tel. 903-893-1616  
Fax: 903-813-3265

October 23, 2019

Via facsimile no. 903-583-3973

Custodian of Records  
James E. Froelich, D.O.  
Family Care Clinic  
2105 N. Center St.  
Bonham, TX 75418

Re: David W. Spindle  
Date of Birth: 04/08/1952

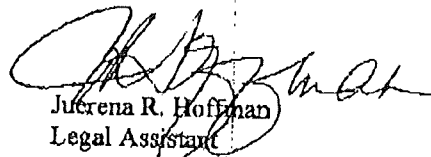
Dear Representative:

This office represents David W. Spindle. In that regard, please complete the enclosed affidavit, ATTACH A COPY OF THE "CERTIFICATE TO RETURN TO WORK" RELEASING MR. SPINDLE TO RETURN TO WORK ON 12/20/2017 FROM YOUR MEDICAL RECORDS, and then forward them to this office. An authorization signed by Mr. Spindle for the release of this information is enclosed.

Under the TEXAS RULES OF CIVIL PROCEDURE, this evidence can be obtained and submitted to the Court by affidavit, which alleviates the necessity of subpoenaing your appearance with these records at the time of trial.

If there is a charge for these copies or otherwise, please let us know, and we will remit same. Your cooperation and assistance in this matter are appreciated.

Sincerely,

  
Jucena R. Hoffman  
Legal Assistant

jrh  
Enclosures